



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Guy A. Rouleau and Bernard Brais

Application No.: 09/590,211 Group: 1632

Filed: June 8, 2000 Examiner: J. Woitach

Confirmation No.: 9680

For: SHORT GCG EXPANSIONS IN THE PAB II GENE FOR  
OCULOPHARYNGEAL MUSCULAR DYSTROPHY AND  
DIAGNOSTIC THEREOF

RECEIVED  
JUN 27 2003  
TECH CENTER 1600/2900

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450	
on <u>6/17/03</u>	<u>Christina McSweeney</u>
Date	Signature
<u>Christina McSweeney</u>	
Typed or printed name of person signing certificate	

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment B for filing in the above-identified application.

[ ] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[ ] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)		(COL. 2)		(COL. 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE		RATE	ADDIT. FEE
TOTAL	36	MINUS	* 36	0	X \$ 9	\$ 0		X \$18	\$ 0
INDEP	8	MINUS	** 8	0	X \$42	\$ 0		X \$84	\$ 0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$140	\$ 0		+ \$280	\$ 0

\* not fewer than 20

\*\* not fewer than 3

TOTAL = \$ 0

TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [            ] month Extension of Time	\$	_____
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>0</u>

A check is enclosed in payment of the following fees:

<input checked="" type="checkbox"/>	Petition for three months Extension of Time	\$	<u>930</u>
<input type="checkbox"/>	Amendment Fee	\$	_____
<input type="checkbox"/>	Other Fees:		
	_____	\$	_____
	_____	\$	_____
	TOTAL:	\$	<u>930</u>

☒ A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

*David E. Brock, R.N. 22592*

By *for Elizabeth W. Mata*

Elizabeth W. Mata

Registration No.: 38,236

Telephone (978) 341-0036

Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated: **6/17/03**